									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO									_					
Effective October 1, 2003										161.	12.	-057	T	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	NTITY	OR	OTHER SMALL		
TOTAL CLAIMS			19					RATE	=	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			19 minus 20=		*0			XS 9=			OR	X\$18=		
INE	EPENDENT C	LAIMS	3 minus 3 =		[*] つ			X43=			OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=			1	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							ĺ	TOTA			OR OR	TOTAL	772	
CLAIMS AS AMENDED - PART II								1017	۱ -		1011	OTHER		
	(Column 1) (Column 2) (Column 3)							SMAL	LE	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=	٦	· ·	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDE			PENDENT	CLAIM		ا ا	+145=			OR	+290=		
									AL			TOTAL		
(Column 1) (Column 2) (Column 3)									:E L		. /	ADDII. PEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	•	=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***	0	=		X43=	1		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENI	CLAIM			+145=			OR	+290=	•	
									E		OR ,	TOTAL DDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=	†	•	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	\dagger					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									1		OR [+290=		
** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADI										··	OR A	DDIT. FEE		
		ber Previously Paid					r foun	d in the a	appr	opriat box	in colu	ımn 1.		